## PATENT APPLATION FEE DETERMINATION RECOR

Application or Docket Number

10/532908

| ı   |  |  |  | ,   |                   | <del></del>                           |       |                     |                        |      |                         |                        |
|---|--|--|--|---|-------------------|---------------------------------------|-------|---------------------|------------------------|------|-------------------------|------------------------|
| CLAIMS AS FILED - PART I  (Column 1) (Column 2) |  |  |  |   |                   |                                       |       | SMALL ENTITY TYPE   |                        | OF   | OTHER THAN SMALL ENTITY |                        |
| U.S   | S. NATIONAL                                    | STAGE FEES   |  |   |                   | <del></del>                           | 7     | RATE                | FEE                    | 7    | RATE                    | 7                      |
| BA:   | SIC FEE  |  | SMALL ENT                                    | Г. = \$ 150                                   | LAR               | GE ENT. = \$ 300                      | 1     | BASIC FEE           | -                      | ٦,,  | BASIC FEE               | 300                    |
| EX/   | AMINATION FI                                   | EE   | Satisfies PCT /<br>(4) = \$ 50               | Article 33(1)-                                |                   | other situations =<br>\$ 100 / \$ 200 | 1     | EXAM FEE            | <del> </del>           | -100 | <b> </b>                | <del>- </del>          |
| SEA   | ARCH FEE                                       |  | U.S. is ISA =<br>ALL other co<br>\$ 200 / \$ | \$ 50 / \$ 100<br>untries =                   | Allo              | ther situations = \$ 250 / \$ 500     | 1     | SEARCH FEE          | -                      |      | EXAM. FEE SEARCH FEE    | 400                    |
| FEE   | FOR EXTRA                                      | SPEC. PGS.   |  | us 100 =                                      |                   | / 50 =                                | 1     | X \$ 125 =          | <del> </del> -         | 1    | ļ                       | -                      |
| тот   | TAL CHARGEA                                    | BLE CLAIMS   | 25 mi  | nus 20 =                                      | *                 | 5                                     | 1     | X \$ 25 =           | -                      | OR   | X \$ 250 =              | 150                    |
| IND   | EPENDENT CI                                    | AIMS   | / n  | ninus 3 =                                     | *                 | <u> </u>                              |       | X \$ 100 =          | <del> </del>           | OR   | X \$ 50 =               | 120                    |
| MUL   | TIPLE DEPEN                                    | IDENT CLAIM PR   | ESENT  | <u>-</u>                                      |                   | П                                     |       | + \$ 180 =          | <del> </del>           | OR   | X \$ 200 =              | <del> </del>           |
| * If  | the difference                                 | e in column 1 is   | less than zero                               | o, enter "0                                   | " in co           | olumn 2                               | ı     | TOTAL               | <del> </del>           | OR   | + \$ 360 =              | 1171                   |
|   |  |  |  |   |                   |                                       |       |                     |                        |      | TOTAL                   | 1150                   |
|   | T  | (Column 1)   | AMENDED - PART II (Column 2) (Column 3)      |   |                   |                                       |       | SMALL               | ENTITY                 | OR   | OTHER<br>SMALL E        |                        |
| AMENDMENT A                                     |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |  | HIGHE<br>NUMB<br>PREVIO<br>PAID F             | ER<br>USLY        | PRESENT<br>EXTRA                      |       | RATE                | ADDI-<br>TIONAL<br>FEE |      | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *  | Minus  | **  |                   | =                                     |       | X \$ 25 =           |                        | OR   | X \$ 50 =               |                        |
|   | Independent                                    | *  | Minus  | ***   |                   | =                                     |       | X \$ 100 =          |                        | OR   | X \$ 200 =              |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |   |                   |                                       |       | + \$ 180 =          |                        | OR   | + \$ 360 =              |                        |
|   |  |  |  |   |                   |                                       |       | TOTAL ADDIT.<br>FEE |                        | OR   | TOTAL ADDIT.            |                        |
|   |  | (Column 1)   |  | (Calum  | <b>- 3</b> \      |                                       |       |                     |                        |      | ,                       | ·                      |
| AMENDMENT B                                     |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  | ·  | (Colum<br>HIGHE<br>NUMBI<br>PREVIOL<br>PAID F | ST<br>ER<br>JSLY  | (Column 3) PRESENT EXTRA              |       | RATE .              | ADDI-<br>TIONAL<br>FEE |      | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *  | Minus  | **  |                   | =                                     | . [   | X \$ 25 =           |                        | OR   | X \$ 50 =               |                        |
|   | Independent                                    | *  | Minus  | ***   |                   | =                                     |       | X \$ 100 =          |                        | OR   | X \$ 200 =              |                        |
|   | FIRST PRES                                     | ENTATION OF MI   | JLTIPLE DEPE                                 | NDENT C                                       | LAIM              |                                       |       | + \$ 180 =          |                        | OR   | + \$ 360 =              |                        |
|   |  |  |  |   |                   |                                       | •     | TOTAL ADDIT.<br>FEE |                        | OR L | TOTAL ADDIT.<br>FEE     |                        |
|   |  |  |  |   |                   |                                       |       | _                   |                        |      |                         |                        |
| ***   | If the "Highest Nu<br>If the "Highest Nu       | imn 1 is less than the<br>mber Previously Paid<br>mber Previously Paid<br>nber Previously Paid | For IN THIS SP.                              | ACE is less t                                 | than <b>'</b> 20' | , enter *20*.                         | n the | appropriate box     | in column 1.           |      |                         | ·                      |